

The following is **required information** for submission of documents to DFAS-LW for payment of Invoice's

When using the DD Form 250 (Aug 2000), DD Form 1155, SF 1449 or similar forms as the receiving report ensure that:

**Form SF1449:**

**Block 2** (contract/purchase order number)

**Block 4** order number

**Block 19** (line item taken from contract/purchase order)

**Block 20** (item description)

**Block 21** (quantity received)

**Block 24** (\$ amount received)

**Block 32a** (check received/accepted blocks)

**Block 32b** (printed name, telephone number, title, mailing address and signature of person authorized to accept supplies/services). **Job title, mailing address and duty phone number can also be listed in the bottom margin of SF-1449.**

**Block 32c** (date (month, day and year) supplies/services accepted)

**Block 33** (check partial/final) **If partial, all pages of SF-1449 must be submitted identifying which line items are authorized to be paid.**

**Block 36** (check partial or final)

**Block 42a** (printed name of receiver)

**Block 42b** Annotate as "Same as block 15".

**Block 42c** (date (month, day and year) supplies/services received)

FROM : 5035th S4

FAX NO. : +9155682669

Mar. 10 2004 12:15PM P7

<b>SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS</b> OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24 AND 30				1. REQUISITION NUMBER WR1102-0349-ND08		PAGE 1 OF 7	
2. CONTRACT NO. GS14F0040K		3. AWARD EFFECTIVE DATE 17-Dec-2003		4. ORDER NUMBER WR11SG-04-F-0090		5. SOLICITATION NUMBER	
7. FOR SOLICITATION INFORMATION CALL:		8. NAME		9. TELEPHONE NUMBER (No Collect Calls)		8. SOLICITATION ISSUE DATE	
9. ISSUED BY ACA, FORT BLISS DIRECTORATE OF CONTRACTING SFQA-SR-BL BUILDING 2021, OLUS ROAD FORT BLISS TX 79916-6912		CODE W911SG		10. THIS ACQUISITION IS <input checked="" type="checkbox"/> UNRESTRICTED <input type="checkbox"/> SET ASIDE: % FOR <input type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> SMALL DISADV. BUSINESS <input type="checkbox"/> 8(A) SIC: SIZE STANDARD:		11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED <input type="checkbox"/> SEE SCHEDULE	
TEL: 916-568-5150 FAX: 916-568-5549				12. DISCOUNT TERMS 30 Days - 0%		13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 DFR 700)	
15. DELIVER TO 2035TH GSU CALVILLO, ADRIAN BLDG 2444 FORT BLISS TX 79916-6900		CODE W91102		18. ADMINISTERED BY ACA, FORT BLISS SEGURA, MELITONA 916-568-1040 SEGURAM@BLISS.ARMY.MIL FORT BLISS TX 79916-6912		CODE W911SG	
17a. CONTRACTOR/ OFFEROR OFFICE DEPOT INC JAMES VEALE DBA: THE OFFICE PLACE 2200 OLD GERMANTOWN RD DELRAY BEACH FL 33445-0299		CODE OVXPF8		18a. PAYMENT WILL BE MADE BY DEFENSE FINANCE AND ACCOUNTING SERVICES LAWTON-FT SILL, OPLOC 4700 MOW WAY RD; DEPT 1791 VENDOR PAY FORT SILL, OK 73503-1791		CODE HQ0300	
FACILITY CODE OVXPF8				18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a. UNLESS BLOCK BELOW IS CHECKED <input type="checkbox"/> SEE ADDENDUM			
<input type="checkbox"/> 17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER							
19. ITEM NO.		20. SCHEDULE OF SUPPLIES/ SERVICES		21. QUANTITY		22. UNIT	
		SEE SCHEDULE					
23. ACCOUNTING AND APPROPRIATION DATA See Schedule				23. UNIT PRICE		24. AMOUNT	
						25. TOTAL AWARD AMOUNT \$20,895.98	
<input type="checkbox"/> 27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1, 52.212-4, FAR 52.212-3, 52.212-5 ARE ATTACHED.				ADDENDA <input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED			
<input type="checkbox"/> 27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4, FAR 52.212-5 IS ATTACHED.				ADDENDA <input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED			
26. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN <input type="checkbox"/> TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DELIVER ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ANY ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED HEREIN.		COPIES		26. AWARD OF CONTRACT: REFERENCE <input type="checkbox"/> OFFER DATED . YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN, IS ACCEPTED AS TO ITEMS:			
30a. SIGNATURE OF OFFEROR/CONTRACTOR		31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER) <i>Harold R. Belders</i>		31c. DATE SIGNED 17-Dec-2003			
30b. NAME AND TITLE OF SIGNER (TYPE OR PRINT)		30c. DATE SIGNED		31b. NAME OF CONTRACTING OFFICER (TYPE OR PRINT) Harold R Belders / Contracting Officer TEL: 916-568-1009 EMAIL:rbelders@bliss.army.mil			
32a. QUANTITY IN COLUMN 21 HAS BEEN <input checked="" type="checkbox"/> RECEIVED <input checked="" type="checkbox"/> INSPECTED <input checked="" type="checkbox"/> ACCEPTED, AND CONFORMS TO THE CONTRACT, EXCEPT AS NOTED				33. SHIP NUMBER		34. VOUCHER NUMBER	
				PARTIAL <input checked="" type="checkbox"/> FINAL		35. AMOUNT VERIFIED CORRECT FOR	
32b. SIGNATURE OF AUTHORIZED GOVT. REPRESENTATIVE <i>Adrian M. Calvillo</i>		32c. DATE 10 MAR 04		36. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input checked="" type="checkbox"/> FINAL		37. CHECK NUMBER	
41b. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT				38. B/R ACCOUNT NUMBER		39. B/R VOUCHER NUMBER	
41c. SIGNATURE AND TITLE OF		41a. DATE		42a. RECEIVED BY (Print) <i>Adrian M. Calvillo</i>		40. PAID BY	
				42b. RECEIVED AT (Location) <i>Same as block 42a</i>			
				42c. DATE RECD (MM/DD/YY) 08/05/04		42d. TOTAL CONTAINERS	

AUTHORIZED FOR LOCAL REPRODUCTION

STANDARD FORM 1449 (10-95)  
Prescribed by GSA  
FAR (48 CFR) 53.212

DSN: 978-1074

Sample